



BOCCE BALL TOURNAMENT REGISTRATION FORM

Event Details

Event Name: City of Trinidad Spring Bocce Ball Tournament
Date: Beginning March 15, 2026
Location: Cimino Park, Downtown Trinidad, CO
Registration Fee: \$20/Team

Team Information

Team Name: _____

Team Player Name #1: _____

Team Player Name #2: _____

Phone Number: _____

Email Address: _____

Payment Information

- Cash
 - Check (Payable to: City of Trinidad)
 - Payment Received
-

Optional Add-On

- Best Team Name Competition – Winner will be awarded a special prize
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Waiver & Agreement

I understand that participation in this bocce ball tournament involves physical activity and possible risk of injury. I voluntarily assume all risks related to participation and release the event organizers, sponsors, and host location from any liability.

Signature: _____

Date: _____

(If under 18, parent/guardian signature required.)